



RL 8/14/97

U.S. CONSUMER PRODUCT SAFETY COMMISSION
WASHINGTON, D.C. 20207

August 14, 1997

CERTIFIED MAIL

Mr. Steve Kennedy
Adjuster
George A. Butler Adjusters, Inc.
15 Mulberry Street
Springfield, MA 0 1105

RE: FOIA Request S705077: Black and Decker Toaster Ovens / Complaints. Reported Incidents and Investigations of Incidents Involving Overheating

Dear Mr. Kennedy:

Thank you for your Freedom of Information Act (FOIA) request seeking information from the Commission. The records from the Commission files responsive to your request have been processed and copies of the releasable responsive records are enclosed. We have searched the Commission's injury information files covering the past two years and the current year for information responsive to your request.

The enclosed records include four Epidemiologic Investigation Reports with the underlying and supporting documentation and related product complaints or reported incidents where available. The Commission has received this information from its formal investigation systems. Through these systems the Commission hopes to learn when specific products are associated with illness, injury or death. The Commission believes that it has taken reasonable steps to assure the accuracy of this information. While conducting the interviews for the investigation reports, Commission staff or contractors have spoken with the individuals involved or with others who witnessed or are familiar with the incidents. Where possible, Commission staff have examined the products reportedly involved in the incidents. Although the Commission has investigated the incidents described in the investigation reports, the Commission has not necessarily determined the cause of the incidents.

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George A. Butler Adjusters, Inc.
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Also enclosed are records pertaining to one product complaint and reported incident submitted to the Commission by a consumer. The consumer or submitter has confirmed the accuracy of the information in the complaint and reported incident. The Commission has neither investigated the incident nor conducted or obtained any evaluations of the product that corroborate the substance of the information contained in the complaint and reported incident. In this case, we have removed the identity of the complainant at his or her request.

The other records from the Commission files responsive to your request relate to two product complaints and reported incidents that the Commission has obtained from consumers, attorneys for consumers and others. The Commission has not received confirmation of the accuracy of the information in the complaints and reported incidents. Pursuant to Exemption 3 of the FOIA, 5 U.S.C. § 552(b)(3) and section 6(b)(1) of the Consumer Product Safety Act (CPSA), 15 U.S.C. § 2055(b)(1), and our regulations, 16 C.F.R. § 1101.32, we must withhold the unconfirmed product complaints and reported incidents.

FOIA Exemption 3 provides for the withholding from disclosure of matters that are specifically exempted from disclosure by another statute. In applying FOIA Exemption 3, we are relying on section 6(b)(1) of the CPSA. That section prohibits the Commission from disclosing information about a consumer product that identifies a manufacturer or private labeler unless the Commission has taken "reasonable steps" to assure that the information is accurate, that disclosure is fair in the circumstances, and that disclosure will be reasonably related to effectuating the purposes of the laws that the Commission administers. See Commission regulation, 16 C.F.R. § 1101.32. The Commission's policy is to withhold each consumer complaint and reported incident unless: (1) the Commission has conducted an investigation of the complaint and reported incident, and the investigation corroborates the substance of the complaint and reported incident; (2) the Commission has conducted or obtained a technical, scientific, or other evaluation of the product that is the subject of the complaint and reported incident, and evaluation corroborates the substance of the information contained in the complaint and reported incident; or (3) the consumer or person reporting or submitting the incident confirms the accuracy of the information. The Commission did not take any of these steps with regard to these certain consumer complaints and reported incidents responsive to your request. While it has been Commission practice since June 1983 to seek confirmation of incoming consumer complaints and incidents, the Commission does not have the resources to seek confirmation of the complaints and incidents where a consumer has not responded to our request for confirmation of the information.

You will note that in the documents disclosed information that could identify injured parties and persons treating them has been deleted, because section 25(c) of the CPSA, 15 U.S.C. § 2074(c)(1), prohibits such disclosures without the consent of those individuals. In some cases the parties have denied consent or consent has not otherwise been obtained.

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According to the Commission's regulations implementing the FOIA at 16 C.F.R. § 1015.7, a partial denial of access to records may be appealed to the General Counsel of the Commission within thirty (30) days of your receipt of this letter. An appeal must be in writing and addressed to: FOIA APPEAL, General Counsel, ATTN: Office of the Secretary, U.S. Consumer Product Safety Commission, Washington, D. C. 20207.

Processing this request, performing the file searches and preparing the information, cost the Commission \$80.00. In this instance, we have decided to waive all of the charges. Thank you for your interest in consumer product safety.

Sincerely,

Todd A. Stevenson
Deputy Secretary and
Freedom of Information Officer
Office of the Secretary

Enclosures

2.1 MAR 1995

1. CASE NUMBER 950306CWE5009		2. INVESTIGATOR'S ID 8101		EPIDEMIOLOGIC INVESTIGATION REPORT	
3. OFFICE CODE 860	4. DATE OF ACCIDENT 950214	5. DATE INITIATED 95.03 03			
6. SYNOPSIS OF ACCIDENT OR COMPLAINT An electric toaster oven malfunctioned in that it turned itself on and overheated. Parts of the oven melted and were blackened with soot. Smoke was produced but no flames were visible. No injury occurred.					
7. LOCATION (Home, School, etc.) Home 10		8. CITY Santa Cruz		9. STATE CA	
10A. FIRST PRODUCT Electric toaster oven 0216		10B. TRADE/BRAND NAME Block & Decker		10C. MODEL NUMBER MFR/REV. 353YIFIED 5/15/97	
10D. MANUFACTURER NAME AND ADDRESS				<input checked="" type="checkbox"/> No Comments made <input type="checkbox"/> Comments attached <input checked="" type="checkbox"/> Excisions/Revisions <input checked="" type="checkbox"/> Firm has not requested further notice	
11A. SECOND PRODUCT		11B. TRADE/BRAND NAME		11C. MODEL NUMBER	
11D. MANUFACTURER NAME AND ADDRESS					
12. AGE OF VICTIM 999	13. SEX 9	14. DISPOSITION No injury 0		15. INJURY DIAGNOSIS NO Injury 90	
16. BODY PART(S) INVOLVED No injury 99	17. RESPONDENT Homeowner 1	18. TYPE OF INVESTIGATION Telephone 2		19. TIME SPENT (Operational hours) 4.0	
20. CATEGORY ID SECT 15 1995	21. CASE SOURCE Hotline H520201A 07	22. SAMPLE COLLECTION NUMBER			
23. PERMISSION TO DISCLOSE NAMES (Non Neiss Cases Only) YES: NO: X					
24. REVIEW DATE 95 03 08	25. REVIEW BY 8101		26. REGIONAL OFFICE DIRECTOR		
27. DISTRIBUTION O: EPDS cc: NYRO, SFRO					

21 MAR 1995

FIELD ACTIVITY COVERSHEET

1 Region/State	2 Operation (Check one) <input type="checkbox"/> Inspection <input type="checkbox"/> Telephone contact <input type="checkbox"/> Other:	3 Date 3/8/95
FOWR/SFRO	<input type="checkbox"/> Establishment visit <input checked="" type="checkbox"/> Investigation	4 Number 950306CWE5009

5 Establishment				
Name:				
Address:				
City:	State:	Zip:	Telephone	
Black & Decker				

6	Related firm	<input type="checkbox"/> Parent	<input type="checkbox"/> Headquarters	<input type="checkbox"/> Subsidiary	<input type="checkbox"/> Other
	Name:	City:		State:	

7 Products covered	8 <i>Other consumer products</i>
<i>Electric Toaster Oven</i>	


<p>9 Establishment Type</p> <p><input checked="" type="checkbox"/> Manufacturer <input type="checkbox"/> Importer</p> <p><input type="checkbox"/> Wholesaler <input type="checkbox"/> Own label distributor</p> <p><input type="checkbox"/> Retailer <input type="checkbox"/> Repackager</p> <p>Other _____</p>	<p>10 Annual production</p> <p>Product covered \$ _____ units:</p> <p>Other products \$ _____ units:</p>
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11 IS business % received _____ % shipped _____	12 Samples collected	13 MIS code 32626	14 Hours Activity 4.0 Travel
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1.5 Reason for activity

16	Announced [](Rationale for announced inspection)	Unannounced []
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7 Employee's Name	Title	Signature	date
James P. DiGrazia	Supervisory Investigator		

8	[X]Endorsement	[]Remarks	[]Summary	[]Other:
	<p>IDI conducted in response to a consumer complaint associated with an electric toaster oven. The oven turned itself on. when no one was in the home. The occupants discover the oven overheating, melting, and smoking. No flames were,visible. No injury occurred. The product was returned to the manufacturer. No further follow up.</p> <p style="text-align: right;"></p>			

19 Reviewer's Name James P. DiGrazia	Title Supervisory Investigator	Signature 
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20 Review Date 3/8/95	21 Distribution O: EPDS cc: NYRO, SFRO	cc c/s: LGC, LDB
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Information for this report was obtained in a phone conversation with the female home-owner. The product involved is an electric toaster oven.

PRE-EVENT

The site of this event is a single family dwelling in a coastal community in central California. The family had used an electric toaster oven for home usage for a number-of years and was satisfied with their experiences. In 1991, the family had occasion to replace the aging toaster oven and chose one of the same brand. They used this new toaster oven daily (at least 4 to 5 times a week) without incident. .

The new toaster oven was placed on a tiled kitchen counter. It was placed away from the edge of the counter near the back wall. It was located underneath overhead wooden cabinets. It was plugged into an electrical wall outlet directly behind the toaster oven. Nothing else was stored on the kitchen counter in the vicinity of the toaster oven.

The toaster oven was left plugged in.

EVENT

The day of the event was 2-14-95, a Tuesday. The adult female in the house used the toaster oven in the morning to prepare toast. The toast was prepared as desired and the toaster oven turned itself off as it had countless times before.

The respondent remained in the house performing cleaning chores until 3:00 PM. She was cleaning in/near the kitchen. She did not

use the toaster oven at lunch. She did not place anything near the toaster oven. There is very little room under the kitchen cabinet near the toaster oven.

The respondent returned to the home at 6:00 PM. The house was full of smoke. She traced the source to the electric toaster oven.

POST EVENT

The respondent found the two elements of the toaster oven scarlet red. The on/off lever was in the up (off) position. A roll of paper towels above the toaster oven was scorched. The tile behind the toaster oven was blackened. The outer metal casing of the toaster oven was covered with soot. and the oven's control knobs were melted. The power cord was melting but the metal conductor was not visible. The plug was melting. The cover plate for the electrical wall outlet was melting and blacked.

The respondent used a towel to unplug the toaster oven. The plug blades did not remain in the outlet. She then aired out the house. Since no flames were observed, the fire department was not called.

The tile and wall surfaces in the kitchen required cleaning but not repainting.

The day after the event, the respondent notified both the manufacturer and CPSC of this incident.

PRODUCT IDENTIFICATION

The manufacturer asked the respondent to return the toaster oven. The respondent sent it to Black & Decker o/a 3-1-95, five days

950306CWE5009
Electric Toaster/Oven

before the telephone interview with C&C.

When filing the complaint on the CPSC Hotline, the respondent described the product as a Black & Decker 1500 watt electric toaster oven, model TR35TY. The on/off switch on the product is a lever that is pushed down to turn the toaster oven on.

The respondent thought the retailer may have been Orchard Supply Hardware, Capitola, California. The respondent purchased the toaster new.

STANDARDS INFORMATION

The respondent reported to the CPSC Hotline that the toaster oven had a UL symbol with the number 228E -associated with the symbol.

ATTACHMENTS

Attached to this report are the assignment documents.

CONSUMER PRODUCT INCIDENT REPORT -

JPR

L-440

1. NAME OF RESPONDENT Ruth Garland	2. PHONE NO. (HOME) (WORK) 408-429-5098 none
3. STREET ADDRESS 629 Windsor St.	4. CITY STATE ZIP CODE Santa Cruz CA 95062

5. DESCRIBE INCIDENT OR HAZARD, INCLUDING DATA ON INJURIES
Toaster oven was plugged in and off when it turned on by itself and consumer later found oven's outer metal casing soot-covered, oven's hard plastic control knobs melted, electrical outlet's hard plastic cover melted, wall area around outlet soot-covered and a roll of paper towels near oven scorched. House's circuit breaker didn't trip. Toaster oven is UL listed #228E.

-cont-

6. DATE OF INCIDENTS 2/14/95	7. IF INJURY OR NEAR MISS OBTAIN AGE/SEX AND DESCRIBE INJURY: 0 Y/N none	8. IF VICTIM DIFFERENT FROM RESPONDENT, PROVIDE NAME none RELATIONSHIP none
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9. DESCRIPTION OF PRODUCT 1500 watt electric toaster oven	10. BRAND NAME Black & Decker
--	----------------------------------

11. MFR/DISTRIBUTOR NAME, ADDR. & PHONE Black & Decker unknown unknown 800-231-9786 unknown unknown unknown	12. MODEL, SERIAL NUMBERS TR35TY	13. DEALER'S NAME, ADDRESS & PHONE unknown unknown unknown unknown
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14. WAS THE PRODUCT DAMAGED, REPAIRED OR MODIFIED? YES x NO IF YES, BEFORE OR AFTER THE INCIDENT? after DESCRIBE: damaged: see narrative	15. PRODUCT PURCHASED NEW x USED DATE PURCHASED '91 AGE 4 yrs.
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16. DOES PRODUCT HAVE WARNING LABELS? IF SO, NOTE: unknown
--

17. HAVE YOU CONTACTED THE MANUFACTURER? YES x NO IF NOT, DO YOU PLAN TO CONTACT THEM? YES NO OTHER?	18. IS THE PRODUCT STILL AVAILABLE? YES x NO IF NOT, ITS DISPOSITION may send to mfr. 3/95	19. MAY WE USE YOUR NAME WITH THIS REPORT? YES x NO
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FOR ADMINISTRATION USE

20. DATE RECEIVED 02/15/95	21. RECEIVED BY (NAME & OFFICE) ldm/HL	22. DOCUMENT NO. H9520201A
23. FOLLOW-UP ACTION SECT 04 1995 950306CWE5009		24. PRODUCT CODE(S) 0216
25. DISTRIBUTION	26. ENDORSER'S NAME & TITLE Caf 2 16 95	

CONSUMER PRODUCT INCIDENT REPORT

H9520201A

Narrative Continued

2/15/95 Consumer called and explained incident to manufacture; (name unknown) , who requested oven for inspection and offered consumer a new replacement toaster oven (unknown if identical). Consumer doesn't want a replacement oven and may send original oven to manufacturer in 1 month.

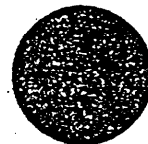
Distributor phone #: unknown

CPSC Source: L/GOVT

JUL 26 1995

1. CASE NO: N9550038 950522CNE5367		0. INVESTIGATOR'S ID 1111		3. OFFICE CODE 800		EPIDEMIOLOGIC INVESTIGATION REPORT	
4. DATE OF INCIDENT YR MO DAY 95 01 30		5. DATE INVESTIGATION INITIATED		YR MO DAY 95 07 06			
6. SYNOPSIS OF INCIDENT OR COMPLAINT: A toaster oven started smoking.							
7. LOCATION (Home, school, etc.) Borne		8. CITY Groton		9. STATE Connecticut		CT	
10A. FIRST PRODUCT Toaster Oven		0216		11A. TRADE/BRAND NAME, MODEL NUMBER, MANUFACTURER & ADDRESS Black & Decker TRO-400TYI Shelton, CT - TRO-400TYI			
10B. SECOND PRODUCT Newspaper		1137		11B. TRADE/BRAND NAME, MODEL NUMBER, MANUFACTURER & ADDRESS			
12. AGE OF VICTIM 999		13. SEX (USE NUMERICAL CODE) Male.....1 Female.....2 Unknown...3		14. DISPOSITION 99		15. INJURY DIAGNOSIS 70	
16. BODY PART 99		17. RESPONDENT(S) (Mother, Friend) Victim/Compl. 1		18. TYPE INVESTIGATION On Site.....1 Telephone..... other.....		19. TIME SPENT 3.0	
20. ATTACHMENTS Multi		9		21. CASE SOURCE Fire Dept.		01	
22. REVIEWED BY 8342		YR MO DAY 95 07 19		22. PERMISSION TO DISCLOSE NAMES (NON-NEISS CASES ONLY) CPSC MAY DISCLOSE MY NAME <input type="checkbox"/> CPSC MAY NOT DISCLOSE MY NAME <input checked="" type="checkbox"/>			
24. NARRATIVE (See Instructions on Page 2)				25. REGIONAL OFFICE DIRECTOR REVIEW Richard D. Swackhamer - 7/12/95			

MFR/PRVLR NOTIFIED
 No Comments made
 Comments attached
 Excisions/Revisions
 Firm has not requested
 further notice



The following investigation was assigned as an IDI on June 3, 1995. The incident involves a toaster oven that had been working for approximately 1 year without any problems.

PRE-INCIDENT:

The victim on May 1, 1995 who was in fine emotional and physical condition arrived home from work and everything appeared to normal. The victim and her dog then went outside. As the victim and the dog were outside the victim stated that she could smell smoke but didn't think to much of it because a neighbor of hers burns things all the time.

INCIDENT:

As the victim was bringing in her dog she smelled smoke and looked up and noticed white smoke spewing throughout her house. Suddenly the smoke detectors started to go off and the victim quickly tried to locate where the smoke was coming from but she could not find it. The victim then called her husband at work. The victim's father in-law happened to pick up the phone. The victim explained to her father in-law what was happening. He immediately told her to get out of the house and call the fire department. The victim dialed 911 and ran next door to her grandfathers house with her dog. The victim informed her grandfather what was happening. The victim and the grandfather ran back to the house where the grandfather immediately discovered that the Black and Decker Toaster Oven which had all the control panels in the off position with newspapers stacked upon it was smoldering.

POST-INCIDENT:

The victim quickly unplugged the toaster oven and put out the smoldering fire of newspapers. As the victim was opening the windows in the house to air it out the Fire Department arrived. The victim informed the Fire Department as to what had just occurred. They informed the victim that this was not the first incident with a Black & Decker Toaster Oven to turn on when the control panel states that it is off. At that point the victim freely handed over the toaster oven to the Groton Fire Department to do what ever they wanted to do with it.

The victim stated that she had received the toaster oven as a shower gift approximately 1 year ago. The victim stated that at the time of the incident the toaster oven was plugged into a regular 120v socket. The controls were in the off position. Being that the product was seldom used newspapers and mail had been placed on the top of the oven.

On June 2, 1995, the victim wrote to the manufacturer to inform them what had occurred. (Exhibit I)

A letter dated June 12, 1995 was received by the victim from the manufacturer acknowledging that they had received her letter. (Exhibit II) Also in this letter Black & Decker stated that they realize that the Groton Fire Department has the possession of the product and that they would like the victim to regain possession so they may have the opportunity to inspect the product. This letter also stated that the manufacturer would like to discuss this matter with the victim. The victim stated she has contacted the manufacturer to discuss the incident but was told to leave a message and a person would get back to her. To date the victim has yet to get a call back from the manufacturer.

On June 9, 1995 an inspector for the Department Of Consumer Protection went to the Groton Fire Department to collect the toaster oven sample to have it shipped to the U.S. Consumer Product Safety Commission for inspection.

On the back of the toaster oven it states "Black & Decker, model No TRO-400TY 1, Shelton CT, 120Volts, 1500 Watts, 50-60 Hz-AC- Only. Household use only. UL Toaster Listed 228E. Toast-R-Oven Broiler.

PRODUCT IDENTIFICATION

Manufacturer: Black & Decker
6 Armstrong Rd
Shelton, CT 06484

Brand Name: Toast-R-Oven

Model Number: TRO -400TYI

EXHIBITS

- I. Letter to manufacturer from victim.
- II Response letter to victim from manufacturer
- III Groton Fire Department Incident Report
- IV Booklet on use and care of toaster oven
- V Pictures of toaster oven

970 222 EN 6 73 67

9010.24

Figure 6-3

RELEASE

RECORD

U. S. CONSUMER PRODUCT SAFETY COMMISSION

AUTHORIZATION FOR RELEASE OF NAME

Thank you for assisting us in collecting information on a potential product safety problem. The Consumer Product Safety Commission depends on concerned people to share product safety information with us. We maintain a record of this information, and use it to assist us in identifying and resolving product safety problems.

We routinely forward this information to manufacturers and private labelers to inform them of the involvement of their product in an accident situation. We also give the information to others requesting information about specific products. Manufacturers need the individual's name so that they can obtain additional information on the product or accident situation.

Would you please indicate on the bottom of this page whether you will allow us to disclose your name. If you request that your name remain confidential, we will of course honor that request. After you have indicated your preference, please sign your name and date the document on the lines provided.

☐

You are hereby authorized to disclose my name and address with the information collected on this case.

☐

My identity is to remain confidential.

Austin Skontarek-Dyon 6/21/95
(Signature) (Date)

Exhibit I

June 2, 1995

Consumer Assistance and Information
Black & Decker (U.S.) Inc.
6 Armstrong Road
Shelton, CT 06404

980522CNE 5367

To Whom It May Concern:

I wanted you to be aware of a situation that occurred in my home on May 1, 1995. Upon arriving home from work I could smell a burning odor throughout my entire house, I checked every room and could not identify what the smell was. I went outside for approximately 8 minutes to let my dog out and when I returned inside my Black & Decker Toaster Oven was ablaze and my entire house was filled with thick smoke. I immediately dialed 911 and the fire department was dispatched to my home, upon their arrival they discovered that my Black & Decker Toaster Oven was over-heating with all the controls in the off position. They informed me that this was not the first incident with a Black & Decker Toaster Oven and that your company had been notified of this occurrence previously and nothing had been done to correct this situation. If I had not arrived home from work when I did, I would have not only lost my home and all its contents, I would have also lost my dog.

On the back of your Use and Care Book you state that, "If the product should become defective within the warranty period we will repair it or elect to replace it free of charge" I do not want it repaired or replaced, but what do you define "defective" as? Coming home to find your Black & Decker Toaster Oven ablaze? I'm very fortunate that I escaped a tragedy, and I hope others have been as lucky as I was, but I feel that this could have been avoided if you only had taken the appropriate measures to correct this serious problem. The Fire Department has confiscated my Black & Decker Toaster Oven and are investigating into this problem further. Please know that I have notified everyone I come in contact with that owns a Black & Decker Toaster Oven to be aware that there is a serious problem and to pass the information on to others who own your products.

Attached is the Fire Incident Report that contains all the information on the fire as well as the year, make, model and serial no. of my Black & Decker Toaster Oven.

Lauren Santacroce-Lyon
38 Chapman Street
Groton, CT 06340

Black & Decker U.S.A. Inc.
701 East Joppa Road
Pawcatuck, Maryland 21286
410-716-3900
Telex 87-930 Mail Stop: TW 177
Direct Dial: 410-716-2182
Fax: 410-716-3379

Exhibit II

750522 CNE 5367

BLACK & DECKER

June 12, 1995

Lauren Santacroce-Lyon
36 Chapman Street
Groton, Connecticut 06340

RE: B&D #: 22520

Dear Ms. Santacroce-Lyon:

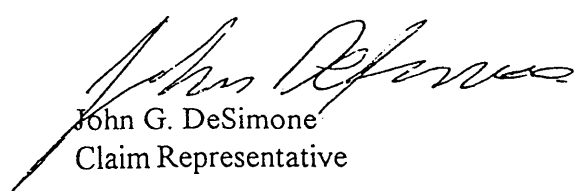
This will acknowledge receipt of your letter dated June 2, 1995.

We thank you for taking the opportunity in advising us of the incident you experienced with one of our products. Black & Decker is very concerned with the use, care and safety of our products and would like an opportunity to inspect your toaster oven. I realize that the Groton Fire Department has possession of the product and therefore we are requesting that you regain possession so we may have the opportunity to inspect the product.

I would also like to discuss the incident with you at your convenience. Please contact me at 1-800-231-9786, extension 2-2182 between the hours of 8:30 AM and 4:30 PM, Monday through Friday.

Thank you for your anticipated cooperation.

Very truly yours,

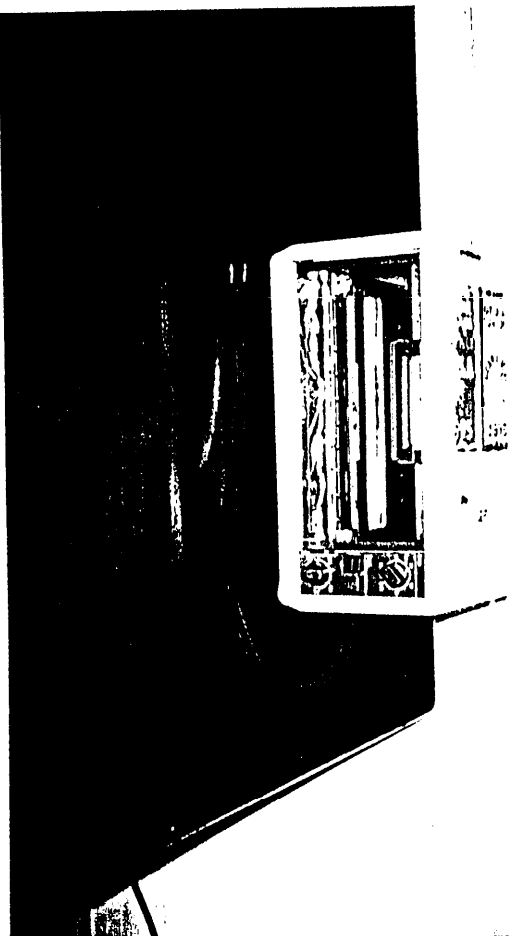

John G. DeSimone
Claim Representative

JGD/vln

950 522 CUE 5327



Pictures of toaster oven



Department of Consumer Protection
CONSUMER STATEMENT/PRODUCT INCIDENT REPORT 950522CNE 536

COMPLAINANT: Name: Donald Rollings (Groton Fire Marshall)

Street: 295 Meridan City: Groton State: CT Zip: 06340

Home Phone: Work Phone: (203) 445-2456

MANUFACTURER: Name: Black & Decker

Street: 701 E. Joppa Rd City: Towson State: NJ Zip: 21204

Have you contacted the manufacturer? Yes No Do you intend to? PCS No
Have you returned the product? Yes No Do you intend to? Yes No

DEALER: Name:

Street: City: State: Zip:

DESCRIPTION OF PRODUCT: TOASTER OVEN AGE OF PRODUCT: 1 YEAR
BRAND NAME: MODEL/SERIAL NO.: 400TY1(?)

IF INJURY OR ILLNESS: Victim's Name: Relationship:
Age: Sex: Date: Type of Injury:
Body Part Involved: Treatment:

GIVE DETAILS OF ACCIDENT, INJURY, OR ILLNESS. DESCRIBE HOW INCIDENT OCCURRED.

SEE INCIDENT REPORT

THE FIRE MARSHAL HAS PRODUCT AT HEADQUARTERS.

Received By: Vincent Puqliese
Date Received: 5/2/95 Source: letter X phone visit
Referred To: CPSC Date: 5/9/95

DO YOU GIVE THE DEPARTMENT OF CONSUMER PROTECTION YOUR PERMISSION TO RELEASE A COPY
OF YOUR CONSUMER STATEMENT? X YES NO

EMAS / FOIA & / 601 / 47

N55-0038A

950522CNE 5367

58CT04

13:55 FAX 203 445 4056

CITY OF GROTON

900 522 CN 5267

2.002

Exhibit III

DEPARTMENT OF PUBLIC SAFETY
DIVISION OF STATE POLICE
SP-227-C (Rev. 11/85)

LOCAL FIRE REPORT TO THE STATE FIRE MARSHAL
BASIC INCIDENT REPORT
FIRE DEPARTMENT CITY OF GROTON (6#1)

☐ REVISED
REPORT

FILE NO.	INCIDENT NO.	EXP NO.	NO.	DAY	YEAR	DAY OF WEEK	ALARM TIME	ARRIVAL TIME	TIME IN SERVICE
080511	951011310	1	05	01	95	MONDAY	1217110	117114	1171219
TYPE OF SITUATION FOUND						TYPE OF ACTION TAKEN			
TOASTER OVEN Fire						INVESTIGATION			
FIXED PROPERTY USE						IGNITION FACTOR			
Single Family Home						UNKNOWN ELECTRICAL FAILURE			
CORRECT ADDRESS						CENSUS TRACT			
36 Chapman ST						106131410 170215			
OCCUPANT NAME (LAST FIRST MI)						TELEPHONE		BOOK OR APT	
LYON LAUREN						445-1384		DATE OF BIRTH	
OWNER NAME (LAST FIRST MI)						ADDRESS		TELEPHONE	
Same AS ABOVE								DATE OF BIRTH	
METHOD OF ALARM FROM PUBLIC						DISTRICT		SHIFT	
GFA						11		101012	
NUMBER FIRE SERVICE PERSONNEL RESPONDED						NUMBER ENGINE RESPONDED		NUMBER LADAL APPARATUS RESPONDED	
111						101011		101011	
NUMBER OTHER VEHICLES RESPONDED						6-14		101011	

COMPLETE FOR ALL INCIDENTS

NUMBER OF INJURIES FIRE SERVICE	OTHER	NUMBER OF FATALITIES FIRE SERVICE	OTHER
111	111	111	111

COMPLEX	MOBILE PROPERTY USE
Single Family Dwelling	N/A
AREA OF ORIGIN	EQUIPMENT INVOLVED IN IGNITION
Kitchen	TOASTER OVEN
FORM OF HEAT OF IGNITION	TYPE OF MATERIAL IGNITED
UNKNOWN SHORT	PLASTIC
METHOD OF EXTINGUISHMENT	LEVEL OF FIRE ORIGIN
SELF	GRADE
ESTIMATED LOSS (DOLLARS ONLY)	
1111111111	

COMPLETE FOR ALL FIRES

VALUE OF BUILDING	VALUE OF CONTENTS	INSURANCE ON BUILDING	INSURANCE ON CONTENTS

NUMBER OF STORIES	CONSTRUCTION TYPE
2 STORIES 1 BASEMENT	PROTECTED wood frame
EXTENT OF FLAME DAMAGE	EXTENT OF SMOKE DAMAGE
OBJECT OF ORIGIN	Room of ORIGIN
DETECTOR PERFORMANCE	SPRINKLER PERFORMANCE
UNKNOWN	N/A
IF SMOKE SPREAD BEYOND ROOM OF ORIGIN	AVENUE OF SMOKE TRAVEL
TYPE OF MATERIAL GENERATING MOST SMOKE	NONE SIGNIFICANT
PLASTIC	
FORM OF MATERIAL GENERATING MOST SMOKE	
N/A	918

COMPLETE IF STRUCTURE FIRE

IF MOBILE PROPERTY	YEAR	MAKE	MODEL	SERIAL NO.	ST	LICENSE NO.
IF EQUIPMENT INVOLVED IN IGNITION	YEAR	MAKE	MODEL	SERIAL NO.		
	1994	Black + Decker	TRC	400TY1(?)		

PART OF mobile no.

INVESTIGATOR'S SIGNATURE

COMMENTS:

OWNER Came Home From WORK AND Could Smell SOMETHING BURNING. UPON ARRIVAL Fd. FOUND THE TOASTER OVEN OVER HEATING WITH ALL OF THE CONTROLS IN THE OFF POSITION. NO STRUCTURAL DAMAGE HAD OCCURRED.

INVESTIGATED BY
LOCAL FIRE MARSHAL
LOCAL POLICE DEPT.

OFFICER FILING OUT REPORT

#1 11/11/95

DATE

Investigation Report - Analyst's Comments

Task No. 950522CNE5367 -Regional Office NYCO
Product Code 0216 Investigator ID 1111
Category SECT041995 Hours Reported 3.0 hr.

Comments

~~Report~~

Newspaper coded As second product.
Model was given in MANUAL, Attached
to IDI.

Respondent was the occupant.

Add to synopsis the controls
were in the opposition, and
Newspaper were stacked upon
the master.

Reviewer ib

Date:

8/9/95

If you believe the identified deficiencies require contacting investigator/victim and requesting further information, please sign here.

Additional Information
Requested .

Signature

950522ENE5767

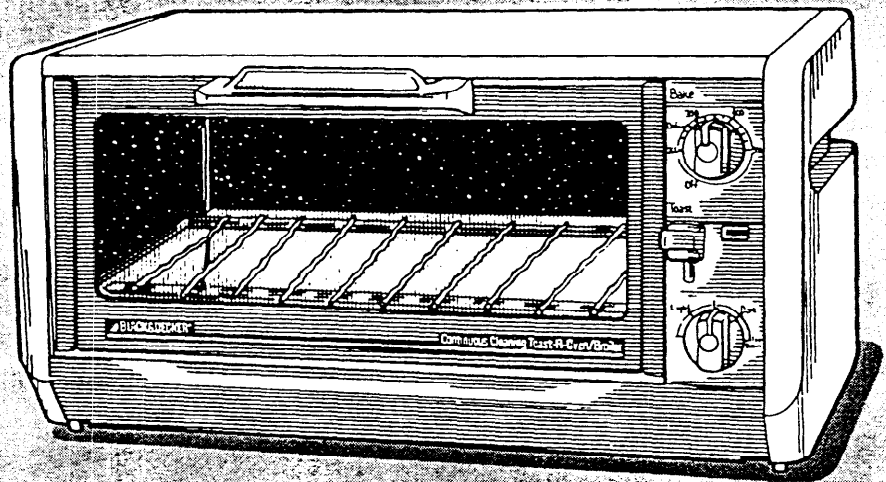


BLACK & DECKER®

SAVE THIS USE AND CARE BOOK

Exhibit IV

Toast-R-Oven™ Broilers



800-231-9786

QUESTIONS? Please call us TOLL FREE
Monday - Friday 8:15 a.m. - 5:00 p.m. Eastern Time.

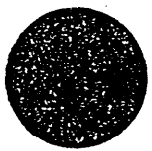
MODELS TR051, TR0400 - TR0600

SECT 15

8 SEP 1996

6

1. CASE NUMBER 960606CCC7237 H9650109		2. INVESTIGATOR'S ID 9041		3. OFFICE CODE 800		EPIDEMIOLOGIC INVESTIGATION REPORT	
4. INCIDENT DATE YR MO DAY 96 04 28		5. DATE IDI INITIATED YR MO DAY 96 08 08					
6. SYNOPSIS OF INCIDENT OR COMPLAINT An electric toaster oven that was not in use, but was plugged in, erupted into flames. The toaster oven was approximately 5-7 years old. The oven was used about once every other day. There were no problems with the toaster before this incident. No one was injured. The toaster oven was destroyed.							
7. LOCATION Home 10		8. CITY Wakefield		9. STATE Massachusetts MA			
10A. FIRST PRODUCT Electric Toaster Oven 0216		11A. TRADUBRAND NAME, MODEL NUMBER, MANUFACTURER & ADDRESS Black & Decker Electric Toaster Oven Model #TRO400TY1, UL #228E Shelton, CT 06484					
10B. SECOND PRODUCT 0000		11B. TRADUBRAND NAME, MODEL NUMBER, MANUFACTURER & ADDRESS					
12. AGE OF VICTIM 999.		13. SEX No Injury 9 No		14. DISPOSITION injury 00		15. INJURY DIAGNOSIS No Injury 70	
16. BODY PART No Injury 99		17. RESPONDENT(S) Wakefield FD 3		18. INVESTIGATION TYPE Telephone 2		19. TIME SPENT 10.0	
20. ATTACHMENTS Multi 9		21. CASE SOURCE Consumer Complaint 07		22. REVIEWED BY 8969 YR MO DAY 96 09 11			
23. PERMISSION TO DISCLOSE NAMES (NON-NEISS CASES ONLY) CPSC MAY DISCLOSE MY NAME CPSC MAY NOT DISCLOSE MY NAME							
24. NARRATIVE (See Instructions on Page 2)				25. REGIONAL DIRECTOR REVIEW DA TE 9-13-96			



MFR/PRVLR NOTIFIED
No Comments made
Comments attached
Excisions/Revisions
firm has not requested
further notice

(USE ADDITIONAL SHEETS IF NECESSARY)

960606CCC7237

PRE-ACCIDENT:

All of the information concerning this incident was obtained through a telephone interview for the victim. The victim is a non smoking male. The victim has not mental or physical deficiencies that could hinder this investigation.

The electric toaster oven was approximately 5-7 years of age and the point of purchase is unknown. The product was used approximately once every other day and always remained plugged in regardless of whether the product was being used.

ACCIDENT:

On April 8, 1996, the victim was sitting in his living room and heard a noise in the kitchen, which is one room over. When the victim entered the kitchen he noticed that the toaster oven was in flames. The victim quickly extinguished the fire. The fire did not spread and no other damage was done other than the burning of the oven. No one was injured.

POST ACCIDENT:

The victim then contacted the Wakefield, MA Fire Department who in turn filed an incident report with this agency. The toaster oven in question was thrown away by the complainant. There were no engineering tests performed on the toaster oven by the Wakefield Fire Department. There is no lawsuit pending.

SAMPLES COLLECTED:

None

PRODUCT IDENTIFICATION:

Black and Decker Electric Toaster Oven
Model TRO400TY1
120v
1500w
UL listed 228E

960606CCC7237

ATTACHMENTS:

1. Field Activity Coversheet
2. Epidemiologic Investigation Report
3. Authorization for Release of Name (will be forwarded)
4. Wakefield F.D. Fire Report (will be forwarded)

Bob's
6/14

ACCIDENT INVESTIGATION REQUEST FORM

GP II
B. Cabay.
6/12/96

Document Number 14 965 010 9 A.

Date of Incident 4/8/96

Category I.D.

Follow-Up Requested

Hazard Analysis

Section 15

Type Follow-Up Requested

Telephone Call

On-Site

Headquarters Contact Jeanne M. Siebert

Assignment Message Please obtain details
of incident and collect sample
if it is still available.

Person(s) to Contact Lieutenant Sullivan

Consumer - 246-6363

Guideline

Requested By Jeanne Siebert

Task Number 960606 CCC 7237

Assigned to N4CO

Date 6/6/96

ISSUE 3 3

MAY 14 1996

CONSUMER PRODUCT INCIDENT REPORT

Region: EASTERN

1. NAME OF RESPONDENT Michael Sullivan (Lieutenant)	2. PHONE NO. (HOME) (WORK) none 617-246-6435
3. STREET ADDRESS. 37 Crescent St. TC-21	4. CITY STATE ZIP CODE Wakefield MA 01880

5. DESCRIBE INCIDENT OR HAZARD, INCLUDING DATA ON INJURIES
Respondent is filing complaint for consumer, Michael Curran, 30 Grove St., Wakefield, MA, 01880, TEL: 617-246-4373. Consumer called Wakefield fire department and told respondent that toaster oven turned on by itself and began to overheat; consumer turned off toaster oven and discontinued use. Toaster oven UL listed.

6. DATE OF INCIDENTS 4/8/96	7. IF INJURY OR NEAR MISS OBTAIN AGE/SEX AND DESCRIBE INJURY: 0 Y/N none	8. IF VICTIM DIFFERENT FROM RESPONDENT, PROVIDE NAME none RELATIONSHIP none
9. DESCRIPTION OF PRODUCT electric 120 volt toaster oven		10. BRAND NAME Black & Decker

11. MFR/DISTRIBUTOR NAME, ADDR. & PHONE Black & Decker unknown unknown unknown unknown	12. MODEL, SERIAL NUMBERS M #TRO400TY1, UL #228E
13. DEALER'S NAME, ADDRESS & PHONE unknown	

14. WAS THE PRODUCT DAMAGED, REPAIRED OR MODIFIED? YES NO x; .IF YES, BEFORE OR AFTER THE INCIDENT? DESCRIBE: no visible damage	15. PRODUCT PURCHASED NEW-x USED DATE PURCHASED. unknown AGE unknown
	16. DOES PRODUCT HAVE WARNING LABELS? IF SO, NOTE: unknown

17. HAVE YOU CONTACTED THE MANUFACTURER? YES NO x IF NOT, DO YOU PLAN TO CONTACT THEM? YES NO x OTHER?	18. IS THE PRODUCT STILL AVAILABLE? YES NO x IF NOT, ITS DISPOSITION consumer has toaster oven	19. MAY WE USE YOUR NAME WITH THIS REPORT? YES x NO
---	--	--

FOR ADMINISTRATION USE		
20. DATE RECEIVED 05/13/96	21. RECEIVED BY (NAME & OFFICE) dec/HL	22. DOCUMENT NO. H9650109A
23. FOLLOW-UP ACTION	24. PRODUCT CODE(S) 0216	
25. DISTRIBUTION	26. ENDORSER'S NAME & TITLE CCH 5/13/1996	

CONSUMER PRODUCT INCIDENT REPORT

H9650109A .

Narrative Continued

CPSC Source: S/GOVT

960606ccc7237

26 OCT 1995

7

1. CASE NUMBER 950921CWE5012		2. INVESTIGATOR'S ID 8360		EPIDEMIOLOGIC INVESTIGATION REPORT	
3. OFFICE CODE 860	4. DATE OF ACCIDENT 9509--	5. DATE INITIATED 950920			
6. SYNOPSIS OF ACCIDENT OR COMPLAINT A consumer, upon returning home, discovered a one-year old oven-toaster turned on and very hot. Whether the appliance had turned on by itself remains unknown. Regardless, the heating elements were red hot, and they didn't turn off, the thermostat is suspect. There was no property damage or injury.					
7. LOCATION(Home, School, etc.) Home		8. CITY Livermore	9. STATE California, CA		
10A. FIRST PRODUCT Oven-toaster, 0216		10B. TRADE/BRAND NAME Toast-R-Oven		10C. MODEL NUMBER Model No. TRO	
10D. MANUFACTURER NAME AND ADDRESS Black and Decker, Shelton, Conn.					
11A. SECOND PRODUCT None		11B. TRADE/BRAND NAME N/A		11C. MODEL NUMBER N/A	
11D. MANUFACTURER NAME AND ADDRESS N/A					
12. AGE OF VICTIM 999	13. SEX 9	14. DISPOSITION No Injury, 0		15. INJURY DIAGNOSIS No injury, 70	
16. BODY PART(S) INVOLVED No injury, 99	17. RESPONDENT Victim, 1	18. TYPE OF INVESTIGATION On site, 1		19. TIME SPENT (Operational hours) 5.0	
20. CATEGORY ID Sect 04 1995	21. CASE SOURCE Consumer complaint, -07		22. SAMPLE COLLECTION NUMBER --860-7380		
23. PERMISSION TO DISCLOSE NAMES (Non Neiss Cases Only) YES: NO: As of this writing, there is no signed document regarding the release of name.					
24. REVIEW DATE 951006	25. REVIEW BY 8101		26. REGIONAL OFFICE DIRECTOR		
27. DISTRIBUTION 0: EPDS ccs: NYRO; SFRO. CCA					

The contents of this report are based on an interview with the "victim" (the respondent). At present, the respondent does not have the owner's manual, 'but should he find it, he will mail it to the CPSC FOWR office.

PRE EVENT:

The respondent purchased the subject toaster/oven about a year prior to the event as a replacement for a similar appliance which would no longer toast. He placed it on the kitchen counter which is surfaced in Formica-type material. The family, consisting of two adults only (no children), used it almost every day for about ten minutes; although usage **was mostly** for toasting bread, several times a week he or his spouse would use the broiler section for "cooking" cheese sandwiches and similar items. For toasting, they used the "lever" which one pushes down and then waits until it pops back up. For broiling, they used the knob control which sets the temperature. The usage was routine, but not heavy. The appliance gave satisfactory performance. It had never been repaired, and gave no indication that a malfunction would occur.

DURING:

On this day, the respondent left the home on an errand. Neither he nor his spouse could recall when they had last used the appliance. To the best of their knowledge, the toaster-oven was in the turned off mode when he left that morning. Upon his return several hours later, he immediately smelled smoke as he entered the front door, and in addition, the smoke detector was sounding an alarm. He went to the kitchen. The subject toaster-oven was turned on, and it was hot, very hot. He immediately unplugged it; he did not "touch" the controls.

POST EVENT:

After the appliance ^{was unplugged} ~~was turned off~~, the respondent inspected it. The shaft portion of the temperature knob was badly burned, and it fell off. He plugged the toaster in. It immediately began to

heat and continued so without going through normal temperature cycling. When he opened the glass door, the toaster turned off. Closing the door, turned the oven back on. He contacted CPSC - FOWR and supplied the unit as a sample with instructions not to "touch" the controls until the malfunction could be isolated by a qualified analyst.

PRODUCT DESCRIPTION:

Product: Oven Toaster
Brand name: Black & Decker
Model: TRO
Power: 120 volts ac, 1500 watts
Dimensions: 14-5/8" wide, 7-1/2" to 8-1/2" deep, 7-3/8" high.
Manufacturer: Black and Decker, Shelton, Conn.

SAMPLES COLLECTED:

T-860-7380

STANDARDS INFORMATION:

The product carries the logo of Underwriters Laboratories

LIST OF EXHIBITS:

- (1): The subject toaster/oven.
- (2): Close-up of the control section of the front panel.
- (3): Labeling on the glass door; it reads "Black & Decker".
- (4): Manufacturer's identification.

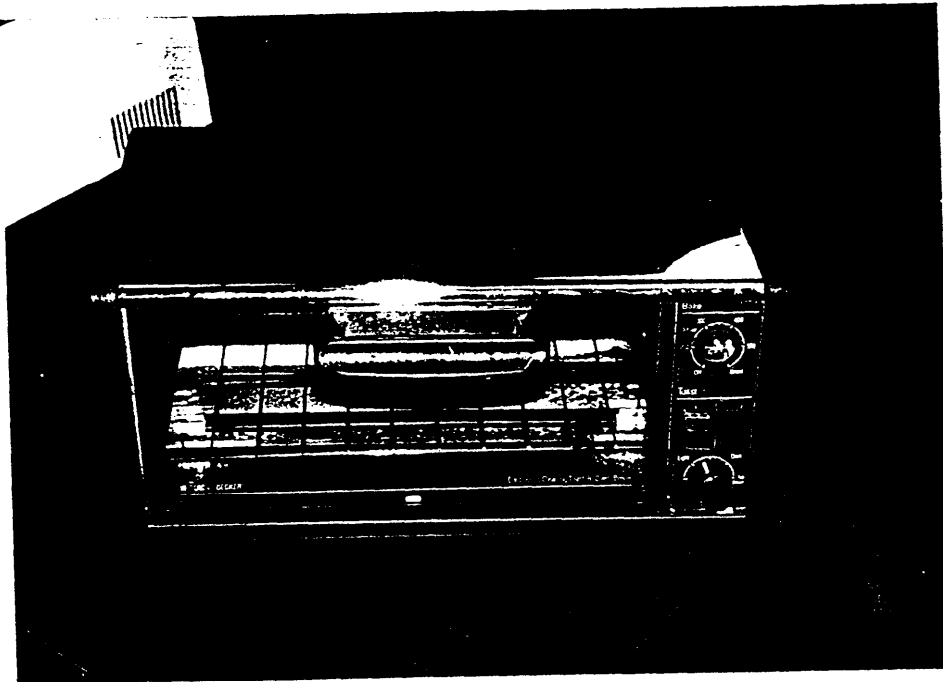
U.S. Consumer Product Safety Commission
SAMPLE COLLECTION REPORT

950921CUE5012

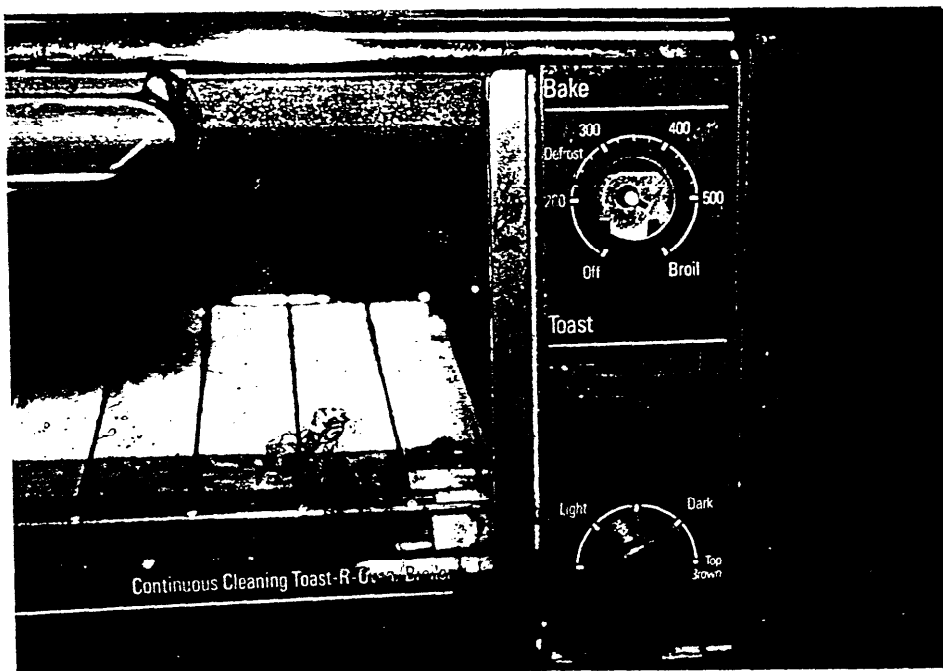
1 Flag <i>SECTION 15</i> <i>Att: Renae Rauchschaalbe</i>		2 Date Collected 20 Sept. 1995		3 Sample Type & Number T-860-7380 XX Physical — Documentary	
4a Product Name Oven Toaster		4b Model TRO		4c NEISS 0216	
5 Assignment ref 950921CUE5012		6 Complete for import samples Port of Entry _____ Entry # & date _____ Country of Origin _____ HSUSA Code _____ Custom contact _____		7 MIS 32626	
8 Hours Activity <u>2.0</u> Travel <u>1.0</u>		9a Home FO FOER		9b Collecting FO FOVR-SFO	
10 Sample Cost \$30.00		11 Invoice value of lot N/A		12 Size of Lot N/A	
13 Manufacturer/Importer Black and Decker Shelton, Conn		14 Shipper/Foreign Mfr N/A		15 Dealer/Import Broker XXXXXXXXXX XXXXXXXXXX Livermore, CA. 94550	
ID#		ID#		ID#	
16 Support ing documents attached None Invoice # & date: _____ Date shipped: _____					
17 Product identification Product is a toaster oven labeled in part "Black & Decker Continuous Cleaning Toast-R-Oven/Broiler Model No. TRO Shelton, Conn 600TY 120 volts-1500 watts 50-60 HZ AC only UL Listed Household Use Only****. The product measures about 14-5/8"W x 7-1/2" to 8-1/2" deep x 7-3/8" high.					
18 Reason for collection/analysis needed FSA CPSA XX FFA PPPA PSA Follow-up to a consumer complaint. Analyze for component that malfunctioned. However, see REMARKS below first.					
19 Summary of Field Screening The product, in the oven/broiler mode, will not turn off by itself - i.e., it keeps heating; apparently, the thermostat has failed.					
20 Sample size, method of collection Sample consists of one unit collected from a consumer. I placed the sample in a plastic bag to which I affixed an official seal.					
21 Identification on sample "T-863-7380 09/20/95 L.S."			22 Identification on seal "T-860-7380 10/04/95 Laurel Spinazze"		
23a Sample delivered to UPS San Francisco			23b Date 10/05/95		24 Orig. report/record sent to New York Regional Office
25 Laboratory/office ESEL HSHL CERM CECA XX Other _____					
26 Remarks DO NOT TOUCH THE CONTROLS: Movement of the controls can upset the malfunction. Only the laboratory analyst should "touch" the controls, and then only after he has taken the oven toaster apart and inspected it for ther-mifunction. I forwarded the product to Renae Rauchschaalbe. NOTE: The consumer is a retired safety engineer; he is willing to discuss the problem with any interested party. This sample is related to IDI 950921CUE5012.					
27 Related samples None					
28a Collector's name/title Laurel Spinazze, Investigator, 8320			28b Collector's signature/date <i>Laurel Spinazze</i> 10/04/95		
29a Reviewer's name/title James DiGrazia, Supervisory Investigator			29b Reviewer's signature/date		

CONSUMER PRODUCT INCIDENT REPORT

1. NAME OF RESPONDENT [REDACTED]		2. TELEPHONE NO. (Home) (Work) [REDACTED]	
3. STREET ADDRESS [REDACTED]		4. CITY STATE ZIP CODE Livermore CA 94550	
5. DESCRIBE ACCIDENT SITUATION OR HAZARD, INCLUDING DATA ON INJURIES. (Use second page if necessary.) A toaster-oven malfunctioned and would not turn off; it became excessively hot, but fortunately consumer came home just in time -- the smoke detector had gone off, and he could smell burning plastic, etc.			
6. DATE OF INCIDENT(S) 9509--	7. IF INJURY OR NEAR MISS, OBTAIN AGE SEX AND DESCRIBE INJURY	6. IF VICTIM DIFFERENT FROM RESPONDENT, PROVIDE NAME RELATIONSHIP	
9. DESCRIPTION OF PRODUCT Oven Toaster		10. BRAND NAME Black and Decker	
11. MANUFACTURER/DISTRIBUTOR NAME, ADDRESS & PHONE Black and Decker Shelton, Conn		12. MODEL, SERIAL NO.'S Model TR0, serial 600TY	
14. WAS THE PRODUCT DAMAGED, REPAIRED OR MODIFIED? YES NO IF YES, BEFORE OR AFTER THE INCIDENT? Describe		13. DEALER'S NAME, ADDRESS & PHONE	
15. PRODUCT PURCHASED NEW X USED DATE PURCHASED 1994 AGE one year		16. DOES PRODUCT HAVE WARNING LABELS? IF SO, NOTE:	
17. HAVE YOU CONTACTED THE MANUFACTURER? YES X NO IF NOT, DO YOU PLAN TO CONTACT THEM? YES NO OTHER		18. IS THE PRODUCT STILL AVAILABLE? YES X NO IF NOT, ITS DISPOSITION	
19. MAY WE USE YOUR NAME WITH I-HIS REPORT? YES NO Uncertain			
FOR ADMINISTRATION USE			
20. DATE RECEIVED Sept. 20, 1995		21. RECEIVED BY (Name & Office) Laurel Spinazze	
23. FOLLOW-UP ACTION SECT 04 1995 950921 CWF 5012		22. DOCUMENT NO. F595011	
25. DISTRIBUTION O. EPDS cc's: NYRO. SFRO		24. PRODUCT CODE(S) 0216	
26. ENDORSEER'S NAME & TITLE EPD Sup.			

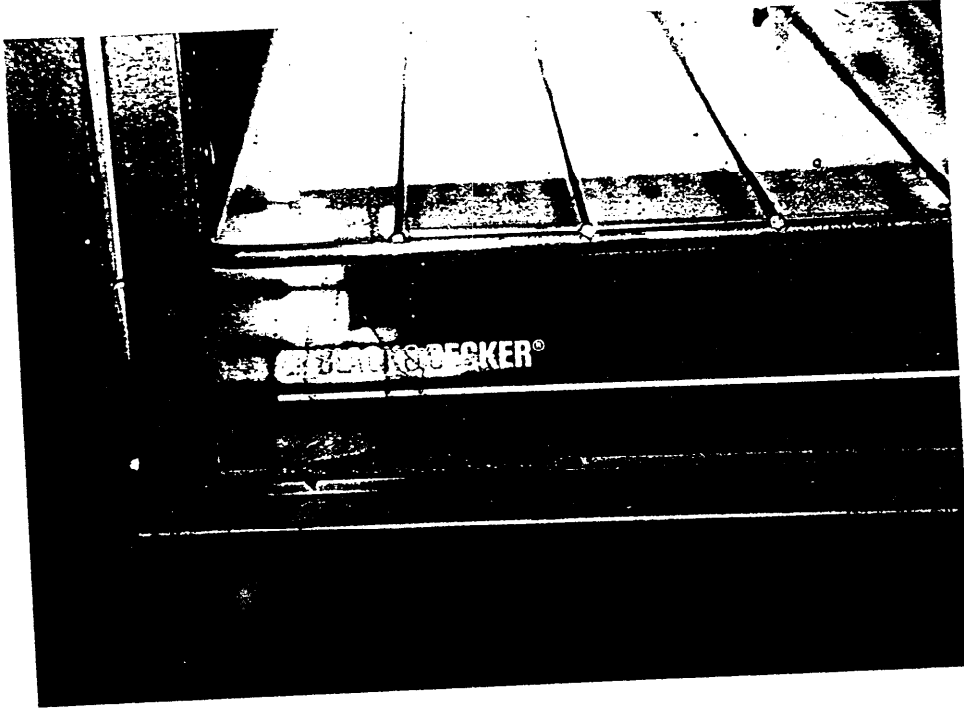


PHOTOGRAPH 1:
The subject toaster oven.

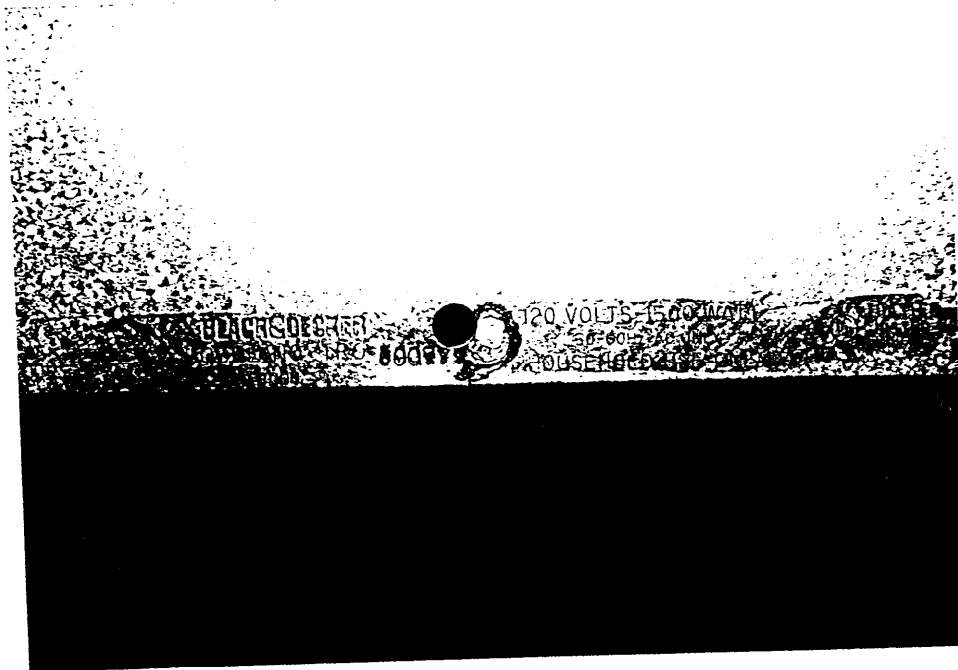


PHOTOGRAPH 2
Close-up of the control section of the front panel. The settings remain "untouched"; they are positioned exactly as they were at the time of the event. Labeling on the glass door reads "Continuous Cleaning Toast-R-Oven/Broiler".

950921CWE5012



PHOTOGRAPH 3:
Labeling on the glass door; it reads "Black & Decker".



PHOTOGRAPH 4
Manufacturer's identification; it is pressed into the underside of the bottom panel (cleaning door) and reads in part "Black & Decker Model No. TRO 600TY Shelton, Conn. 120 volts - 1500 watts 50-60 Hz - ac only Household use only UL toaster Listed 228E ***".

CONSUMER PRODUCT INCIDENT REPORT

AUG 16 1995

1. NAME OF RESPONDENT

2. PHONE NO. (HOME) (WORK)

none

3. STREET ADDRESS

4. CITY

STATE ZIP CODE

N. Dartmouth

MA 02747-1011

5. DESCRIBE INCIDENT OR HAZARD, INCLUDING DATA ON INJURIES

Oven was on "toaster" setting at 450 degrees for 4 minutes. Consumer noticed outside of oven was hot to the touch and found several burn marks on top of oven's hard plastic outer casing. Consumer went to turn off oven by its hard plastic knob but it popped off. Consumer was able to put knob back on oven to turn it off. Consumer discontinued use of oven.

-cont-

6. DATE OF INCIDENTS
8/10/95

7. IF INJURY OR NEAR MISS OBTAIN AGE/SEX

0 Y/N 81

AND DESCRIBE INJURY:

none

8. IF VICTIM DIFFERENT FROM RESPONDENT, PROVIDE NAME

none

RELATIONSHIP

none

9. DESCRIPTION OF PRODUCT

electric toaster/broiler oven

10. BRANDNAME

Black & Decker

11. MFR/DISTRIBUTOR NAME, ADDR. & PHONE

Black & Decker
6 Armstrong Rd.
Snelton, CT 06484
800-231-9786

unknown
unknown
unknown

12. MODE, SERIAL NUMBERS
TR0500

13. DEALER'S NAME, ADDRESS & PHONE

Filene's #93
Silver City Galleria
Taunton, MA 00000
508-880-0030

14. WAS THE PRODUCT DAMAGED, REPAIRED OR MODIFIED? YES NO x IF YES, BEFORE OR AFTER THE INCIDENT? DESCRIBE:

15. PRODUCT PURCHASED NEW x USED
DATE PURCHASED 8/10/95 AGE 1 day

16. DOES PRODUCT HAVE WARNING LABELS? IF SO, NOTE: unknown

17. HAVE YOU CONTACTED THE MANUFACTURER? YES x NO
IF NOT, DO YOU PLAN TO CONTACT THEM? YES NO OTHER? x

Consumer Reports

18. IS THE PRODUCT STILL AVAILABLE? YES x NO
IF NOT, ITS DISPOSITION
returning to dealer 8/12/95

19. MAY WE USE YOUR NAME WITH THIS REPORT? YES x NO

20. DATE RECEIVED
08/11/95

21. RECEIVED BY (NAME & OFFICE)

22. DOCUMENT NO.
H9580140A

23. FOLLOW-UP ACTION

24. PRODUCT CODE(S)
0234

25. DISTRIBUTION

26. ENDORSER'S NAME & TITLE

Oct 8/14/95

CONSUMER PRODUCT INCIDENT REPORT

H9580140A

Narrative Continued

8/11/95 Consumer called and explained incident to manufacturer's customer service rep., (name unknown), who said oven is not insulated and is made to get hot and if consumer was unhappy with oven to return it to dealer. Consumer plans to return oven to dealer for a refund on 8/12/95. UL listing is unknown.

Distributor phone #: unknown

CPSC Source: BOOK

AUG 28 1995

Q M

If you have any changes, additions, or comments you wish to make concerning your attached report, please make them in the space below.

Subsequent to the return of the Black & Decker electric toaster / broiler oven, I purchased a toaster manufactured by ^{OSTER} ~~Decker~~ which is insulated. I am very pleased with the decision to revert to an electric toaster.

I confirm **that** the information in the attached report (including any changes, additions, or comments I have made) is accurate to the best of my knowledge and belief.

Signature

Date

9-1-95

☐

I **request** that you do not release my name.

☒

You *may* release my name to the manufacturer but I request that you not **release** it to the general public:.

☐

You may release my name to the manufacturer and to the public.

46

4580140

0234